

[First Reprint]

SENATE, No. 2133

STATE OF NEW JERSEY

218th LEGISLATURE

INTRODUCED MARCH 5, 2018

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SYNOPSIS

Mandates health benefits coverage for fertility preservation services under certain health insurance plans.

CURRENT VERSION OF TEXT

As reported by the Senate Commerce Committee on December 3, 2018, with amendments.

(Sponsorship Updated As Of: 12/17/2019)

1 AN ACT concerning health benefits coverage for fertility
2 preservation services under certain health insurance plans and
3 supplementing various parts of statutory law.

4
5 **BE IT ENACTED** *by the Senate and General Assembly of the State*
6 *of New Jersey:*

7
8 1. a. A hospital service corporation contract which provides
9 hospital or medical expense benefits for groups with ¹more than¹ 50
10 ¹**[or more]**¹ persons and is delivered, issued, executed or renewed
11 in this State, or approved for issuance or renewal in this State by the
12 Commissioner of Banking and Insurance, on or after the effective
13 date of this act, shall provide coverage for standard fertility
14 preservation services when a medically necessary treatment may
15 directly or indirectly cause iatrogenic infertility.

16 For the purposes of this section:

17 “Iatrogenic infertility” means an impairment of fertility caused
18 by surgery, radiation, chemotherapy, or other medical treatment
19 affecting reproductive organs or processes.

20 “May directly or indirectly cause” means a medical treatment
21 with a likely side effect of iatrogenic infertility as established by the
22 American Society for Reproductive Medicine, the American
23 Society of Clinical Oncology, or ¹**[other reputable professional**
24 **organization]** as defined by the New Jersey Department of Health¹.

25 “Standard fertility preservation services” means procedures
26 consistent with established medical practices and professional
27 guidelines published by the American Society for Reproductive
28 Medicine, the American Society of Clinical Oncology, or ¹**[other**
29 **reputable professional organization that save or protect the oocytes,**
30 **sperm, or reproductive tissue of a patient, including, but not limited**
31 **to: embryo cryopreservation, oocyte and sperm cryopreservation,**
32 **gonadal shielding, and ovarian transposition]** as defined by the New
33 Jersey Department of Health¹. ¹“Standard fertility preservation
34 services” shall not include the storage of sperm or oocytes.¹

35 The benefits shall be provided to the same extent as for any other
36 medical condition under the contract. The same copayments,
37 deductibles, and benefit limits shall apply to the provision of
38 standard fertility preservation services pursuant to this section as
39 those applied to other medical or surgical benefits under the
40 contract.

41 b. A hospital service corporation providing coverage under this
42 section shall not determine the provision of standard fertility
43 preservation services based on a covered person’s expected length
44 of life, present or predicted disability, degree of medical

EXPLANATION – Matter enclosed in bold-faced brackets **[thus]** in the above bill is
not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SCM committee amendments adopted December 3, 2018.

1 dependency, perceived quality of life, or other health conditions, or
2 based on personal characteristics, including age, sex, sexual
3 orientation, marital status, or gender identity.

4 c. This section shall apply to those hospital service corporation
5 contracts in which the hospital service corporation has reserved the
6 right to change the premium.

7
8 2. a. A medical service corporation contract which provides
9 hospital or medical expense benefits for groups with ¹more than 50
10 ¹**["or more"]** persons and is delivered, issued, executed or renewed
11 in this State, or approved for issuance or renewal in this State by the
12 Commissioner of Banking and Insurance, on or after the effective
13 date of this act, shall provide coverage for standard fertility
14 preservation services when a medically necessary treatment may
15 directly or indirectly cause iatrogenic infertility.

16 For the purposes of this section:

17 "Iatrogenic infertility" means an impairment of fertility caused
18 by surgery, radiation, chemotherapy, or other medical treatment
19 affecting reproductive organs or processes.

20 "May directly or indirectly cause" means a medical treatment
21 with a likely side effect of iatrogenic infertility as established by the
22 American Society for Reproductive Medicine, the American
23 Society of Clinical Oncology, or ¹**["other reputable professional
24 organization"] as defined by the New Jersey Department of Health**¹.

25 "Standard fertility preservation services" means procedures
26 consistent with established medical practices and professional
27 guidelines published by the American Society for Reproductive
28 Medicine, the American Society of Clinical Oncology, or ¹**["other
29 reputable professional organization that save or protect the oocytes,
30 sperm, or reproductive tissue of a patient, including, but not limited
31 to: embryo cryopreservation, oocyte and sperm cryopreservation,
32 gonadal shielding, and ovarian transposition"] as defined by the New
33 Jersey Department of Health**¹. ¹**"Standard fertility preservation
34 services" shall not include the storage of sperm or oocytes.**¹

35 The benefits shall be provided to the same extent as for any other
36 medical condition under the contract. The same copayments,
37 deductibles, and benefit limits shall apply to the provision of
38 standard fertility preservation services pursuant to this section as
39 those applied to other medical or surgical benefits under the
40 contract.

41 b. A medical service corporation providing coverage under this
42 section shall not determine the provision of standard fertility
43 preservation services based on a covered person's expected length
44 of life, present or predicted disability, degree of medical
45 dependency, perceived quality of life, or other health conditions, or
46 based on personal characteristics, including age, sex, sexual
47 orientation, marital status, or gender identity.

1 c. This section shall apply to those medical service corporation
2 contracts in which the medical service corporation has reserved the
3 right to change the premium.

4
5 3. a. A health service corporation contract which provides
6 hospital or medical expense benefits for groups with ¹more than 50
7 ¹or more persons and is delivered, issued, executed or renewed
8 in this State, or approved for issuance or renewal in this State by the
9 Commissioner of Banking and Insurance, on or after the effective
10 date of this act shall provide coverage for standard fertility
11 preservation services when a medically necessary treatment may
12 directly or indirectly cause iatrogenic infertility.

13 For the purposes of this section:

14 “Iatrogenic infertility” means an impairment of fertility caused
15 by surgery, radiation, chemotherapy, or other medical treatment
16 affecting reproductive organs or processes.

17 “May directly or indirectly cause” means a medical treatment
18 with a likely side effect of iatrogenic infertility as established by the
19 American Society for Reproductive Medicine, the American
20 Society of Clinical Oncology, or ¹other reputable professional
21 organization as defined by the New Jersey Department of Health¹.

22 “Standard fertility preservation services” means procedures
23 consistent with established medical practices and professional
24 guidelines published by the American Society for Reproductive
25 Medicine, the American Society of Clinical Oncology, or ¹other
26 reputable professional organization that save or protect the oocytes,
27 sperm, or reproductive tissue of a patient, including, but not limited
28 to: embryo cryopreservation, oocyte and sperm cryopreservation,
29 gonadal shielding, and ovarian transposition as defined by the New
30 Jersey Department of Health¹. ¹“Standard fertility preservation
31 services” shall not include the storage of sperm or oocytes.¹

32 The benefits shall be provided to the same extent as for any other
33 medical condition under the contract. The same copayments,
34 deductibles, and benefit limits shall apply to the provision of
35 standard fertility preservation services pursuant to this section as
36 those applied to other medical or surgical benefits under the
37 contract.

38 b. A health service corporation providing coverage under this
39 section shall not determine the provision of standard fertility
40 preservation services based on a covered person’s expected length
41 of life, present or predicted disability, degree of medical
42 dependency, perceived quality of life, or other health conditions, or
43 based on personal characteristics, including age, sex, sexual
44 orientation, marital status, or gender identity.

45 c. This section shall apply to those health service corporation
46 contracts in which the health service corporation has reserved the
47 right to change the premium.

1 4. a. A group health insurance policy which provides hospital
2 or medical expense benefits for groups with ¹more than¹ 50 ¹or
3 more¹ persons and is delivered, issued, executed or renewed in this
4 State, or approved for issuance or renewal in this State by the
5 Commissioner of Banking and Insurance, on or after the effective
6 date of this act, shall provide coverage for standard fertility
7 preservation services when a medically necessary treatment may
8 directly or indirectly cause iatrogenic infertility.

9 For the purposes of this section:

10 “Iatrogenic infertility” means an impairment of fertility caused
11 by surgery, radiation, chemotherapy, or other medical treatment
12 affecting reproductive organs or processes.

13 “May directly or indirectly cause” means a medical treatment
14 with a likely side effect of iatrogenic infertility as established by the
15 American Society for Reproductive Medicine, the American
16 Society of Clinical Oncology, or ¹other reputable professional
17 organization as defined by the New Jersey Department of Health¹.

18 “Standard fertility preservation services” means procedures
19 consistent with established medical practices and professional
20 guidelines published by the American Society for Reproductive
21 Medicine, the American Society of Clinical Oncology, or ¹other
22 reputable professional organization that save or protect the oocytes,
23 sperm, or reproductive tissue of a patient, including, but not limited
24 to: embryo cryopreservation, oocyte and sperm cryopreservation,
25 gonadal shielding, and ovarian transposition as defined by the New
26 Jersey Department of Health¹. ¹“Standard fertility preservation
27 services” shall not include the storage of sperm or oocytes.¹

28 The benefits shall be provided to the same extent as for any other
29 medical condition under the policy. The same copayments,
30 deductibles, and benefit limits shall apply to the provision of
31 standard fertility preservation services pursuant to this section as
32 those applied to other medical or surgical benefits under the policy.

33 b. An insurer providing coverage under this section shall not
34 determine the provision of standard fertility preservation services
35 based on an insured’s expected length of life, present or predicted
36 disability, degree of medical dependency, perceived quality of life,
37 or other health conditions, or based on personal characteristics,
38 including age, sex, sexual orientation, marital status, or gender
39 identity.

40 c. This section shall apply to those group health insurance
41 policies in which the insurer has reserved the right to change the
42 premium.

43
44 5. a. A health maintenance organization contract that
45 provides hospital or medical expense benefits for groups with ¹more
46 than¹ 50 ¹or more¹ persons and is delivered, issued, executed or
47 renewed in this State, or approved for issuance or renewal in this

1 State by the Commissioner of Banking and Insurance, on or after
2 the effective date of this act, shall provide coverage for standard
3 fertility preservation services when a medically necessary treatment
4 may directly or indirectly cause iatrogenic infertility.

5 For the purposes of this section:

6 “Iatrogenic infertility” means an impairment of fertility caused
7 by surgery, radiation, chemotherapy, or other medical treatment
8 affecting reproductive organs or processes.

9 “May directly or indirectly cause” means a medical treatment
10 with a likely side effect of iatrogenic infertility as established by the
11 American Society for Reproductive Medicine, the American
12 Society of Clinical Oncology, or ¹“other reputable professional
13 organization” as defined by the New Jersey Department of Health¹.

14 “Standard fertility preservation services” means procedures
15 consistent with established medical practices and professional
16 guidelines published by the American Society for Reproductive
17 Medicine, the American Society of Clinical Oncology, or ¹“other
18 reputable professional organization that save or protect the oocytes,
19 sperm, or reproductive tissue of a patient, including, but not limited
20 to: embryo cryopreservation, oocyte and sperm cryopreservation,
21 gonadal shielding, and ovarian transposition” as defined by the New
22 Jersey Department of Health¹. ¹“Standard fertility preservation
23 services” shall not include the storage of sperm or oocytes.¹

24 The benefits shall be provided to the same extent as for any other
25 medical condition under the contract. The same copayments,
26 deductibles, and benefit limits shall apply to the provision of
27 standard fertility preservation services pursuant to this section as
28 those applied to other medical or surgical benefits under the
29 contract.

30 b. A health maintenance organization providing coverage under
31 this section shall not determine the provision of standard fertility
32 preservation services based on an enrollee’s expected length of life,
33 present or predicted disability, degree of medical dependency,
34 perceived quality of life, or other health conditions, or based on
35 personal characteristics, including age, sex, sexual orientation,
36 marital status, or gender identity.

37 c. This section shall apply to those health maintenance
38 organization contracts in which the health maintenance organization
39 has reserved the right to change the premium.

40
41 6. a. The State Health Benefits Commission shall ensure that
42 every contract purchased by the commission on or after the
43 effective date of this act that provides hospital or medical expense
44 benefits shall provide coverage for standard fertility preservation
45 services when a medically necessary treatment may directly or
46 indirectly cause iatrogenic infertility.

47 For the purposes of this section:

1 “Iatrogenic infertility” means an impairment of fertility caused
2 by surgery, radiation, chemotherapy, or other medical treatment
3 affecting reproductive organs or processes.

4 “May directly or indirectly cause” means a medical treatment
5 with a likely side effect of iatrogenic infertility as established by the
6 American Society for Reproductive Medicine, the American
7 Society of Clinical Oncology, or ¹“other reputable professional
8 organization” as defined by the New Jersey Department of Health¹.

9 “Standard fertility preservation services” means procedures
10 consistent with established medical practices and professional
11 guidelines published by the American Society for Reproductive
12 Medicine, the American Society of Clinical Oncology, or ¹“other
13 reputable professional organization that save or protect the oocytes,
14 sperm, or reproductive tissue of a patient, including, but not limited
15 to: embryo cryopreservation, oocyte and sperm cryopreservation,
16 gonadal shielding, and ovarian transposition” as defined by the New
17 Jersey Department of Health¹. ¹“Standard fertility preservation
18 services” shall not include the storage of sperm or oocytes.¹

19 The benefits shall be provided to the same extent as for any other
20 medical condition under the contract. The same copayments,
21 deductibles, and benefit limits shall apply to the provision of
22 standard fertility preservation services pursuant to this section as
23 those applied to other medical or surgical benefits under the
24 contract.

25 b. The State Health Benefits Commission shall not purchase a
26 contract that determines the provision of standard fertility
27 preservation services based on a covered person’s expected length
28 of life, present or predicted disability, degree of medical
29 dependency, perceived quality of life, or other health conditions, or
30 based on personal characteristics, including age, sex, sexual
31 orientation, marital status, or gender identity.

32

33 7. a. The School Employees’ Health Benefits Commission
34 shall ensure that every contract purchased by the commission on or
35 after the effective date of this act that provides hospital or medical
36 expense benefits shall provide coverage for standard fertility
37 preservation services when a medically necessary treatment may
38 directly or indirectly cause iatrogenic infertility.

39 For the purposes of this section:

40 “Iatrogenic infertility” means an impairment of fertility caused
41 by surgery, radiation, chemotherapy, or other medical treatment
42 affecting reproductive organs or processes.

43 “May directly or indirectly cause” means a medical treatment
44 with a likely side effect of iatrogenic infertility as established by the
45 American Society for Reproductive Medicine, the American
46 Society of Clinical Oncology, or ¹“other reputable professional
47 organization” as defined by the New Jersey Department of Health¹.

1 “Standard fertility preservation services” means procedures
2 consistent with established medical practices and professional
3 guidelines published by the American Society for Reproductive
4 Medicine, the American Society of Clinical Oncology, or ¹“other
5 reputable professional organization that save or protect the oocytes,
6 sperm, or reproductive tissue of a patient, including, but not limited
7 to: embryo cryopreservation, oocyte and sperm cryopreservation,
8 gonadal shielding, and ovarian transposition” as defined by the New
9 Jersey Department of Health¹. ¹“Standard fertility preservation
10 services” shall not include the storage of sperm or oocytes.¹

11 The benefits shall be provided to the same extent as for any other
12 medical condition under the contract. The same copayments,
13 deductibles, and benefit limits shall apply to the provision of
14 standard fertility preservation services pursuant to this section as
15 those applied to other medical or surgical benefits under the
16 contract.

17 b. The School Employees’ Health Benefits Program shall not
18 purchase a contract that determines the provision of standard
19 fertility preservation services based on a covered person’s expected
20 length of life, present or predicted disability, degree of medical
21 dependency, perceived quality of life, or other health conditions, or
22 based on personal characteristics, including age, sex, sexual
23 orientation, marital status, or gender identity.

24

25 8. This act shall take effect on the 90th day after enactment.